## 117000201148

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## **COVER LETTER**

	n Section Corporations							
	ment to Articles of LLC							
SUBJECT: Name of Limited Liability Company								
The enclosed Art	of Amendment and fee(s) are submitted for filing.							
Please return all	espondence concerning this matter to the following:							
	Doniece Stockton							
	Name of Person							
	Sawyer & Sawyer, P.A.							
	Firm/Company							
	8913 Conroy Windermere Rd.							
	Address	,						
	Orlando, FL 32835							
	City/State and Zip Code	•						
	dstockton@sawyerandsawyerpa.com  E-mail address: (to be used for future annual report notification)							
For further inform	on concerning this matter, please call:							
Doniece Stockton	407 909-1900							
	at (	ress  d Zip Code  ature annual report notification)  7 909-1900  a Code Daytime Telephone Number  Filing Fee & S60.00 Filing Fee, Certificate of Status &						
Enclosed is a che	or the following amount:							
\$25.00 Filing	Certificate of Status Certified Copy Certifica (additional copy is enclosed) Certified	te of Status &						

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FI. 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Red Door Farm Custom Creations (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on \_\_09/27/2017 and assigned Florida document number  $\frac{L17000201148}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida \_

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
AMBR	Jamie R. Stockton	921 Leslie Lewis Rd.	□ Add
		Havana, FL 32333	■ Remove
			□ Change
AMBR	Jayson R. Strickland	921 Leslie Lewis Rd.	<u> </u>
		Havana, FL 32333	□ Remove
			Change
			Add
			Remove    Change
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Note: If	the date inserted in	this block does i	not meet the a	pplicable stati	utory filing re	quirements, th	s date will not	be listed as
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Typed or printed name of signee

Filing Fee: \$25.00